

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 019934-000710US										
	In re Application of Jennifa Gosling et al.											
	Application Number 09/686,020	Filed October 10, 2000										
	For METHODS OF TREATING A CCX CKR-MEDIATED DISEASE (AMENDED)											
	Art Unit 1647	Examiner Bunner, Bridget E.										
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table> <tr> <td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td>\$110</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td>\$</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td>\$</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td>\$</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td>\$</td> </tr> </table> <p> <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 55 . </p> <p> <input type="checkbox"/> A check in the amount of the fee is enclosed. </p> <p> <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. </p> <p> <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. </p> <p> <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430. </p> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p> <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). </p> <p> <input checked="" type="checkbox"/> attorney or agent of record. Registration Number 42,271 </p> <p> <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). </p> <p>Registration number if acting under 37 CFR 1.34(a). _____.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>August 9, 2004</p> <p>Date</p> <p>Signature</p> <p>Scott L. Ausenhus, Reg. No. 42,271</p> <p>Typed or printed name</p> <p>08/12/2004 HALI11 0000062 201430 09686020</p> <p>02 FC:2251 55.00 DA</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p> <p><input checked="" type="checkbox"/> *Total of 1 form is submitted.</p>			<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$110	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$
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